

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

San Bernardino County Safety Employees Benefit Association Federal PAC

ADDRESS (number and street)

735 E. Carnegie Dr.

Ste. 125

☐Check if different
than previously
reported. (ACC)

San Bernardino

CA

92408

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00408344

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☒January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

1 0

0 1

2 0 0 7

through

1 2

3 1

2 0 0 7

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

William Abernathie

Signature of Treasurer

Electronically Filed by William Abernathie

Date

0 1

1 4

2 0 0 7

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

San Bernardino County Safety Employees Benefit Association Federal PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	0	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2007		6684.55
(b) Cash on Hand at Beginning of Reporting Period	9952.61	
(c) Total Receipts (from Line 19)	1323.48	5371.84
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	11276.09	12056.39
7. Total Disbursements (from Line 31)	600.00	1380.30
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	10676.09	10676.09
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

San Bernardino County Safety Employees Benefit Association Federal PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	0	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	920.00	1080.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	400.00	4275.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	1320.00	5355.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5)	1320.00	5355.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	3.48	16.84
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	1323.48	5371.84
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	1323.48	5371.84

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
(i) Federal Share.....		
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	500.00	1000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	100.00	380.30
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	600.00	1380.30
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	600.00	1380.30

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	1320.00	5355.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1320.00	5355.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

San Bernardino County Safety Employees Benefit Association Federal PAC

A.

Full Name (Last, First, Middle Initial)

William Abernathie

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 0 7

Transaction ID: SA11AI.5434

Amount of Each Receipt this Period

10.00

Payroll deduction

B.

Full Name (Last, First, Middle Initial)

William Abernathie

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 2 / 2 0 0 7

Transaction ID: SA11AI.5435

Amount of Each Receipt this Period

10.00

Payroll deduction

C.

Full Name (Last, First, Middle Initial)

William Abernathie

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 7

Transaction ID: SA11AI.5436

Amount of Each Receipt this Period

10.00

Payroll deduction

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 / 36

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

San Bernardino County Safety Employees Benefit Association Federal PAC

A.

Full Name (Last, First, Middle Initial)

William Abernathie

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City	State	Zip Code
San Bernardino	CA	92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San BernardinoOccupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	0	/	2	0	0	7

Transaction ID: SA11AI.5437

Amount of Each Receipt this Period

10.00

Payroll deduction

B.

Full Name (Last, First, Middle Initial)

Paul Amicone

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City	State	Zip Code
San Bernardino	CA	92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San BernardinoOccupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	8	/	2	0	0	7

Transaction ID: SA11AI.5440

Amount of Each Receipt this Period

10.00

Payroll deduction

C.

Full Name (Last, First, Middle Initial)

Paul Amicone

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City	State	Zip Code
San Bernardino	CA	92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San BernardinoOccupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	2	/	2	0	0	7

Transaction ID: SA11AI.5441

Amount of Each Receipt this Period

10.00

Payroll deduction

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

San Bernardino County Safety Employees Benefit Association Federal PAC

A.

Full Name (Last, First, Middle Initial)

Paul Amicone

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 7

Transaction ID: SA11AI.5442

Amount of Each Receipt this Period

10.00

Payroll deduction

B.

Full Name (Last, First, Middle Initial)

Paul Amicone

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.5443

Amount of Each Receipt this Period

10.00

Payroll deduction

C.

Full Name (Last, First, Middle Initial)

Sebastian Barnes

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 0 7

Transaction ID: SA11AI.5446

Amount of Each Receipt this Period

10.00

Payroll deduction

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

San Bernardino County Safety Employees Benefit Association Federal PAC

A.

Full Name (Last, First, Middle Initial)

Sebastian Barnes

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 2 / 2 0 0 7

Transaction ID: SA11AI.5447

Amount of Each Receipt this Period

10.00

Payroll deduction

B.

Full Name (Last, First, Middle Initial)

Sebastian Barnes

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 7

Transaction ID: SA11AI.5448

Amount of Each Receipt this Period

10.00

Payroll deduction

C.

Full Name (Last, First, Middle Initial)

Sebastian Barnes

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.5449

Amount of Each Receipt this Period

10.00

Payroll deduction

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

San Bernardino County Safety Employees Benefit Association Federal PAC

A.

Full Name (Last, First, Middle Initial)

Robert Boone

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 0 7

Transaction ID: SA11AI.5452

Amount of Each Receipt this Period

10.00

Payroll deduction

B.

Full Name (Last, First, Middle Initial)

Robert Boone

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 2 / 2 0 0 7

Transaction ID: SA11AI.5453

Amount of Each Receipt this Period

10.00

Payroll deduction

C.

Full Name (Last, First, Middle Initial)

Robert Boone

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 7

Transaction ID: SA11AI.5454

Amount of Each Receipt this Period

10.00

Payroll deduction

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

San Bernardino County Safety Employees Benefit Association Federal PAC

A.

Full Name (Last, First, Middle Initial)

Robert Boone

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.5455

Amount of Each Receipt this Period

10.00

Payroll deduction

B.

Full Name (Last, First, Middle Initial)

Sherry Eversole-Patterson

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 8 / 2 0 0 7

Transaction ID: SA11AI.5458

Amount of Each Receipt this Period

10.00

Payroll deduction

C.

Full Name (Last, First, Middle Initial)

Sherry Eversole-Patterson

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 2 / 2 0 0 7

Transaction ID: SA11AI.5459

Amount of Each Receipt this Period

10.00

Payroll deduction

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

San Bernardino County Safety Employees Benefit Association Federal PAC

A.

Full Name (Last, First, Middle Initial)

Sherry Eversole-Patterson

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 7

Transaction ID: SA11AI.5460

Amount of Each Receipt this Period

10.00

Payroll deduction

B.

Full Name (Last, First, Middle Initial)

Sherry Eversole-Patterson

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.5461

Amount of Each Receipt this Period

10.00

Payroll deduction

C.

Full Name (Last, First, Middle Initial)

Daniel Finneran

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 0 7

Transaction ID: SA11AI.5467

Amount of Each Receipt this Period

10.00

Payroll deduction

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

San Bernardino County Safety Employees Benefit Association Federal PAC

A.

Full Name (Last, First, Middle Initial)

Daniel Finneran

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 2 / 2 0 0 7

Transaction ID: SA11AI.5464

Amount of Each Receipt this Period

10.00

Payroll deduction

B.

Full Name (Last, First, Middle Initial)

Daniel Finneran

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 7

Transaction ID: SA11AI.5465

Amount of Each Receipt this Period

10.00

Payroll deduction

C.

Full Name (Last, First, Middle Initial)

Daniel Finneran

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.5466

Amount of Each Receipt this Period

10.00

Payroll deduction

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

San Bernardino County Safety Employees Benefit Association Federal PAC

A.

Full Name (Last, First, Middle Initial)

William Forester

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 0 7

Transaction ID: SA11AI.5470

Amount of Each Receipt this Period

10.00

Payroll deduction

B.

Full Name (Last, First, Middle Initial)

William Forester

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 2 / 2 0 0 7

Transaction ID: SA11AI.5471

Amount of Each Receipt this Period

10.00

Payroll deduction

C.

Full Name (Last, First, Middle Initial)

William Forester

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 7

Transaction ID: SA11AI.5472

Amount of Each Receipt this Period

10.00

Payroll deduction

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

San Bernardino County Safety Employees Benefit Association Federal PAC

A.

Full Name (Last, First, Middle Initial)

William Forester

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.5473

Amount of Each Receipt this Period

10.00

Payroll deduction

B.

Full Name (Last, First, Middle Initial)

Brian Fratt

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 0 7

Transaction ID: SA11AI.5476

Amount of Each Receipt this Period

10.00

Payroll deduction

C.

Full Name (Last, First, Middle Initial)

Brian Fratt

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 2 / 2 0 0 7

Transaction ID: SA11AI.5477

Amount of Each Receipt this Period

10.00

Payroll deduction

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

San Bernardino County Safety Employees Benefit Association Federal PAC

A.

Full Name (Last, First, Middle Initial)

Brian Fratt

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 7

Transaction ID: SA11AI.5478

Amount of Each Receipt this Period

10.00

Payroll deduction

B.

Full Name (Last, First, Middle Initial)

Brian Fratt

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.5479

Amount of Each Receipt this Period

10.00

Payroll deduction

C.

Full Name (Last, First, Middle Initial)

Jason Grantham

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 0 7

Transaction ID: SA11AI.5482

Amount of Each Receipt this Period

10.00

Payroll deduction

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

San Bernardino County Safety Employees Benefit Association Federal PAC

A.

Full Name (Last, First, Middle Initial)

Jason Grantham

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 2 / 2 0 0 7

Transaction ID: SA11AI.5483

Amount of Each Receipt this Period

10.00

Payroll deduction

B.

Full Name (Last, First, Middle Initial)

Jason Grantham

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 6 / 2 0 0 7

Transaction ID: SA11AI.5484

Amount of Each Receipt this Period

10.00

Payroll deduction

C.

Full Name (Last, First, Middle Initial)

Jason Grantham

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.5485

Amount of Each Receipt this Period

10.00

Payroll deduction

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

San Bernardino County Safety Employees Benefit Association Federal PAC

A.

Full Name (Last, First, Middle Initial)

Harry Hatch

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 0 7

Transaction ID: SA11AI.5488

Amount of Each Receipt this Period

10.00

Payroll deduction

B.

Full Name (Last, First, Middle Initial)

Harry Hatch

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 2 / 2 0 0 7

Transaction ID: SA11AI.5489

Amount of Each Receipt this Period

10.00

Payroll deduction

C.

Full Name (Last, First, Middle Initial)

Harry Hatch

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 7

Transaction ID: SA11AI.5490

Amount of Each Receipt this Period

10.00

Payroll deduction

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

San Bernardino County Safety Employees Benefit Association Federal PAC

A.

Full Name (Last, First, Middle Initial)

Harry Hatch

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.5491

Amount of Each Receipt this Period

10.00

Payroll deduction

B.

Full Name (Last, First, Middle Initial)

Edward Jimenez

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 0 7

Transaction ID: SA11AI.5494

Amount of Each Receipt this Period

10.00

Payroll deduction

C.

Full Name (Last, First, Middle Initial)

Edward Jimenez

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 2 / 2 0 0 7

Transaction ID: SA11AI.5495

Amount of Each Receipt this Period

10.00

Payroll deduction

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

San Bernardino County Safety Employees Benefit Association Federal PAC

A.

Full Name (Last, First, Middle Initial)

Edward Jimenez

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 7

Transaction ID: SA11AI.5496

Amount of Each Receipt this Period

10.00

Payroll deduction

B.

Full Name (Last, First, Middle Initial)

Edward Jimenez

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.5497

Amount of Each Receipt this Period

10.00

Payroll deduction

C.

Full Name (Last, First, Middle Initial)

Robert Johnston

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 0 7

Transaction ID: SA11AI.5500

Amount of Each Receipt this Period

10.00

Payroll deduction

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

San Bernardino County Safety Employees Benefit Association Federal PAC

A.

Full Name (Last, First, Middle Initial)

Robert Johnston

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 2 / 2 0 0 7

Transaction ID: SA11AI.5502

Amount of Each Receipt this Period

10.00

Payroll deduction

B.

Full Name (Last, First, Middle Initial)

Robert Johnston

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 7

Transaction ID: SA11AI.5503

Amount of Each Receipt this Period

10.00

Payroll deduction

C.

Full Name (Last, First, Middle Initial)

Robert Johnston

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.5504

Amount of Each Receipt this Period

10.00

Payroll deduction

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

San Bernardino County Safety Employees Benefit Association Federal PAC

A.

Full Name (Last, First, Middle Initial)

Laren Leichter

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 0 7

Transaction ID: SA11AI.5508

Amount of Each Receipt this Period

10.00

Payroll deduction

B.

Full Name (Last, First, Middle Initial)

Laren Leichter

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 2 / 2 0 0 7

Transaction ID: SA11AI.5510

Amount of Each Receipt this Period

10.00

Payroll deduction

C.

Full Name (Last, First, Middle Initial)

Laren Leichter

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 7

Transaction ID: SA11AI.5511

Amount of Each Receipt this Period

10.00

Payroll deduction

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 36

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

San Bernardino County Safety Employees Benefit Association Federal PAC

A.

Full Name (Last, First, Middle Initial)

Laren Leichter

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City	State	Zip Code
San Bernardino	CA	92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San BernardinoOccupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	0	/	2	0	0	7

Transaction ID: SA11AI.5513

Amount of Each Receipt this Period

10.00

Payroll deduction

B.

Full Name (Last, First, Middle Initial)

Roxanne Logan

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City	State	Zip Code
San Bernardino	CA	92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San BernardinoOccupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	8	/	2	0	0	7

Transaction ID: SA11AI.5517

Amount of Each Receipt this Period

10.00

Payroll deduction

C.

Full Name (Last, First, Middle Initial)

Roxanne Logan

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City	State	Zip Code
San Bernardino	CA	92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San BernardinoOccupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	2	/	2	0	0	7

Transaction ID: SA11AI.5518

Amount of Each Receipt this Period

10.00

Payroll deduction

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

San Bernardino County Safety Employees Benefit Association Federal PAC

A.

Full Name (Last, First, Middle Initial)

Roxanne Logan

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 7

Transaction ID: SA11AI.5519

Amount of Each Receipt this Period

10.00

Payroll deduction

B.

Full Name (Last, First, Middle Initial)

Roxanne Logan

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.5520

Amount of Each Receipt this Period

10.00

Payroll deduction

C.

Full Name (Last, First, Middle Initial)

Ken Lutz

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 0 7

Transaction ID: SA11AI.5523

Amount of Each Receipt this Period

10.00

Payroll deduction

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

San Bernardino County Safety Employees Benefit Association Federal PAC

A.

Full Name (Last, First, Middle Initial)

Ken Lutz

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 2 / 2 0 0 7

Transaction ID: SA11AI.5524

Amount of Each Receipt this Period

10.00

Payroll deduction

B.

Full Name (Last, First, Middle Initial)

Ken Lutz

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 7

Transaction ID: SA11AI.5525

Amount of Each Receipt this Period

10.00

Payroll deduction

C.

Full Name (Last, First, Middle Initial)

Ken Lutz

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.5526

Amount of Each Receipt this Period

10.00

Payroll deduction

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

San Bernardino County Safety Employees Benefit Association Federal PAC

A.

Full Name (Last, First, Middle Initial)

Colin McKenzie

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 0 7

Transaction ID: SA11AI.5527

Amount of Each Receipt this Period

20.00

Payroll deduction

B.

Full Name (Last, First, Middle Initial)

Colin McKenzie

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 7

Transaction ID: SA11AI.5528

Amount of Each Receipt this Period

20.00

Payroll deduction

C.

Full Name (Last, First, Middle Initial)

Colin McKenzie

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 8 / 2 0 0 7

Transaction ID: SA11AI.5529

Amount of Each Receipt this Period

20.00

Payroll deduction

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

San Bernardino County Safety Employees Benefit Association Federal PAC

A.

Full Name (Last, First, Middle Initial)

Colin McKenzie

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 2 / 2 0 0 7

Transaction ID: SA11AI.5530

Amount of Each Receipt this Period

20.00

Payroll deduction

B.

Full Name (Last, First, Middle Initial)

Colin McKenzie

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 7

Transaction ID: SA11AI.5531

Amount of Each Receipt this Period

20.00

Payroll deduction

C.

Full Name (Last, First, Middle Initial)

Colin McKenzie

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.5532

Amount of Each Receipt this Period

20.00

Payroll deduction

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

San Bernardino County Safety Employees Benefit Association Federal PAC

A.

Full Name (Last, First, Middle Initial)

Date Monday

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 0 7

Transaction ID: SA11AI.5535

Amount of Each Receipt this Period

10.00

Payroll deduction

B.

Full Name (Last, First, Middle Initial)

Date Monday

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 2 / 2 0 0 7

Transaction ID: SA11AI.5536

Amount of Each Receipt this Period

10.00

Payroll deduction

C.

Full Name (Last, First, Middle Initial)

Date Monday

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 7

Transaction ID: SA11AI.5540

Amount of Each Receipt this Period

10.00

Payroll deduction

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

San Bernardino County Safety Employees Benefit Association Federal PAC

A.

Full Name (Last, First, Middle Initial)

Dale Mondary

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.5539

Amount of Each Receipt this Period

10.00

Payroll deduction

B.

Full Name (Last, First, Middle Initial)

Dan Rice

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 0 7

Transaction ID: SA11AI.5545

Amount of Each Receipt this Period

10.00

Payroll deduction

C.

Full Name (Last, First, Middle Initial)

Dan Rice

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 2 / 2 0 0 7

Transaction ID: SA11AI.5546

Amount of Each Receipt this Period

10.00

Payroll deduction

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

San Bernardino County Safety Employees Benefit Association Federal PAC

A.

Full Name (Last, First, Middle Initial)

Dan Rice

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 6 / 2 0 0 7

Transaction ID: SA11AI.5547

Amount of Each Receipt this Period

10.00

Payroll deduction

B.

Full Name (Last, First, Middle Initial)

Dan Rice

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.5548

Amount of Each Receipt this Period

10.00

Payroll deduction

C.

Full Name (Last, First, Middle Initial)

Kristen Riegel

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 8 / 2 0 0 7

Transaction ID: SA11AI.5552

Amount of Each Receipt this Period

10.00

Payroll deduction

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

San Bernardino County Safety Employees Benefit Association Federal PAC

A.

Full Name (Last, First, Middle Initial)

Kristen Riegel

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 2 / 2 0 0 7

Transaction ID: SA11AI.5554

Amount of Each Receipt this Period

10.00

Payroll deduction

B.

Full Name (Last, First, Middle Initial)

Kristen Riegel

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 7

Transaction ID: SA11AI.5553

Amount of Each Receipt this Period

10.00

Payroll deduction

C.

Full Name (Last, First, Middle Initial)

Kristen Riegel

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.5555

Amount of Each Receipt this Period

10.00

Payroll deduction

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

San Bernardino County Safety Employees Benefit Association Federal PAC

A.

Full Name (Last, First, Middle Initial)

Dean Swan

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 0 7

Transaction ID: SA11AI.5558

Amount of Each Receipt this Period

10.00

Payroll deduction

B.

Full Name (Last, First, Middle Initial)

Dean Swan

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 2 / 2 0 0 7

Transaction ID: SA11AI.5559

Amount of Each Receipt this Period

10.00

Payroll deduction

C.

Full Name (Last, First, Middle Initial)

Dean Swan

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 7

Transaction ID: SA11AI.5560

Amount of Each Receipt this Period

10.00

Payroll deduction

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

San Bernardino County Safety Employees Benefit Association Federal PAC

A.

Full Name (Last, First, Middle Initial)

Dean Swan

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.5561

Amount of Each Receipt this Period

10.00

Payroll deduction

B.

Full Name (Last, First, Middle Initial)

Russell Weart

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 0 7

Transaction ID: SA11AI.5564

Amount of Each Receipt this Period

10.00

Payroll deduction

C.

Full Name (Last, First, Middle Initial)

Russell Weart

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 2 / 2 0 0 7

Transaction ID: SA11AI.5565

Amount of Each Receipt this Period

10.00

Payroll deduction

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

San Bernardino County Safety Employees Benefit Association Federal PAC

A.

Full Name (Last, First, Middle Initial)

Russell Weart

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 6 / 2 0 0 7

Transaction ID: SA11AI.5566

Amount of Each Receipt this Period

10.00

Payroll deduction

B.

Full Name (Last, First, Middle Initial)

Russell Weart

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing
federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.5567

Amount of Each Receipt this Period

10.00

Payroll deduction

SUBTOTAL of Receipts This Page (optional)

20.00

TOTAL This Period (last page this line number only)

920.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 35 / 36

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

San Bernardino County Safety Employees Benefit Association Federal PAC

A.

Full Name (Last, First, Middle Initial)

Friends of Joe Baca

Mailing Address P.O. Box 362

City State Zip Code
San Bernardino CA 92402

Purpose of Disbursement
Campaign Contribution

Candidate Name

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: CA District: 43

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5568

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

500.00

TOTAL This Period (last page this line number only)

500.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 36 / 36

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

San Bernardino County Safety Employees Benefit Association Federal PAC

A.

Full Name (Last, First, Middle Initial)

Smith Marion & Co.

Mailing Address 22365 Barton Rd., Ste. 108

City State Zip Code
Grand Terrace CA 92313

Purpose of Disbursement
Professional Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.5578

Date of Disbursement

/ /

Amount of Each Disbursement this Period

100.00

SUBTOTAL of Disbursements This Page (optional)

100.00

TOTAL This Period (last page this line number only)

100.00